visual servoing technique presented in section 2. The position of the needle that gives visual alignment is called $\underline{D_2}$ ~~L_2~~.

On page 4, please replace the first full paragraph with the following replacement paragraph.

The positions of the needle $\underline{D_1}$ ~~L_1~~ $\subset P_1$ and $\underline{D_2}$ ~~L_2~~ $\subset P_2$ define a unique plane P, which contains the X-ray source, the target point T and the fixed entry point F. This is essentially the maximum information that can be obtained from a single viewpoint.

On page 4, please replace the second full paragraph with the following replacement paragraph.

The physician needs to move the C-arm to a second viewing direction. The surgeon defines projection f' of needle entry point F and the projection t' of the 3D target point T in the new image $\underline{I_2}$. Next, the needle is moved only in the plane P until the needle is once again visually aligned to the target in the image $\underline{I_2}$ (see FIG. 1c). This is done using the visual servoing approach of section 2. This results in the final 3D alignment $\underline{D_T}$ of the needle, the entry point and the anatomic target point. The needle is then ready to be inserted. The correctness of the alignment can also be checked by moving the C-arm to a third viewing direction.

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On page 4, line ~~26~~ please insert the following sentence at the beginning of the fourth full paragraph.

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Reference now is made to FIG. 2.

Please replace the paragraph beginning on page 12, line 19, and ending on page 13, line 5, with the following replacement paragraph.

In accordance with an embodiment of the invention, a primary target for biopsy and a secondary target through which a biopsy needle must pass on its way to the primary target are given. The method for determining the best entry point for a percutaneous procedure in accordance with the invention comprises steps shown in FIG. 5 for the